



# 9-11 Respond to the Call 2011 Volunteer Workday Individual Registration Form

[Online Signup Available](#)

<b>Name</b>	
<b>Age</b>	
<b>Address</b>	
<b>City/State/Zip</b>	
<b>Home Phone</b>	
<b>Cell Phone</b>	
<b>Email</b>	
<b>Emergency Contact Name and phone</b>	

On Saturday, September 10, I am able to volunteer

Full day:  8am-3pm

Partial day:  8 am-noon

noon-3pm

Special medical concerns:	
Special dietary concerns:	
I understand secondary insurance is provided in case of emergency. My Insurance Co. and Policy # is:	

Circle T-shirt Size: Youth: 10/12 14/16 Adult: S M L XL XXL XXXL

Registration Fee:  \$20-adult  \$10 College Student  \$10 child (under 18)

Adults not wanting a shirt may pay \$15. Check here:  I do not want a new 9/11 shirt.

The fee pays for breakfast & lunch, T-shirt, and insurance as well as for a donation of materials or support for the worksite. If you can only work a partial day, please consider paying the full amount to help cover all costs of the day.

Make checks payable to **Christian Temple** (Please write "9 -11 Workday" on memo line).

[ ] If you have paid online, please note amount paid here \$\_\_\_\_\_

Anyone who is unable to be present but wishes to participate is invited to make a monetary donation toward casserole ingredients or to one of the other charities. Please place your donation in an envelope labeled with its intended use. You may request a receipt for tax deductible contributions.

# Volunteer Skills List

Print name \_\_\_\_\_

All levels of skills will be needed for the tasks of the day.

Please check the appropriate level for you.

	Highly Skilled (Professional)	Semi-Skilled	Unskilled (Willing to Learn)
Finish Carpentry			
Framing			
Gardening/landscaping			
Painting			

If you would like to **choose a preferred site**, please do so here:

### *PROJECTS IN THE COMMUNITY (as available)*

\_\_\_ **PLEASE PLACE ME WHERE I'M MOST NEEDED**

\_\_\_ **Civic Works:** Community landscaping in inner city

\_\_\_ **Children's Home:** Beautification and planting

\_\_\_ **First Fruits Farm:** Harvesting crops for food banks and shelters

\_\_\_ **Catonsville Emergency Food Ministry:** Grounds beautification; food sorting as needed

\_\_\_ **Therapeutic & Recreational Riding Center:** Ground beautification

\_\_\_ **Glynn Taff Assisted Living:** Assisting with resident service project and socializing

\_\_\_ **Habitat ReStore.** Stocking and re-stocking

\_\_\_ **The Samaritan Women.** Gardening; tasks as assigned

\_\_\_ \_\_\_\_\_:

### *PROJECTS AT THE CHURCH*

\_\_\_ Preparing lunches on Friday, September 10 for volunteers

\_\_\_ **Knitting:** Making caps for preemie newborns

\_\_\_ **Casseroles:** Cooking for the Shelter

\_\_\_ **CT Chores:** Minor repairs and sprucing up

Please check if you are **willing to be a crew chief** at your worksite. We'll give you all necessary materials to do this.

\_\_\_ Yes, I am willing to be a crew chief.

If you bring personal tools please mark your tools with your name.

Return registration form by **September 4, 2011** to:      OR      Complete [online registration](#)

Christian Temple  
Attn: 9-11 Work Day – Diane Preisinger  
5820 Edmondson Avenue  
Baltimore, MD 21228-1929

Fees may be sent in with registration or paid on the 10<sup>th</sup>.

**For more information please contact Diane Preisinger by email: [dpreisinger1@verizon.net](mailto:dpreisinger1@verizon.net).**

Box for office use only

**9/11 Respond to the Call  
Christian Temple  
September 10, 2011  
WAIVER of LIABILITY**

(To be read completely and signed by all persons participating in Respond to the Call)

I, \_\_\_\_\_ \* wish to be a participant in the Volunteer Workday, Respond to the Call, sponsored by Christian Temple, Catonsville, Maryland.

I, being of the age of legal consent and majority, do hereby acknowledge my understanding and agreement that neither Christian Temple, Civic Works, The Samaritan Women, Children's Home of Catonsville, Catonsville Emergency Food Ministry, First Fruits Farm, Glynn Taff Assisted Living, Therapeutic & Recreational Riding Center or Habitat ReStore undertakes or assumes any liability or responsibility for any loss of or damage to personal property, sickness, injury or death which may arise out of the aforesaid travel and work. For good and valuable consideration, I, for myself, my heirs, executors, administrators and assigns hereby waive any claim whatsoever against Christian Temple, Civic Works, The Samaritan Women, Children's Home of Catonsville, Catonsville Emergency Food Ministry, First Fruits Farm, Glynn Taff Assisted Living, Therapeutic & Recreational Riding Center or Habitat ReStore their present or future members, officers, directors, agents or employees or any claim that I, my heirs, executors, administrators or assigns may hereafter have by reason of loss of or damage to personal property, injury, sickness or death, which may arise out of the aforesaid travel and work.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(adult volunteer)

Print full name and address: \_\_\_\_\_  
\_\_\_\_\_

Name & Phone Number of Emergency Contact: \_\_\_\_\_  
\_\_\_\_\_

**\*If volunteer is younger than 18 years of age; parent or legal guardian must sign:**

Name of under age volunteer(s): \_\_\_\_\_

Signature of parent or legal guardian: \_\_\_\_\_

Address of parent or legal guardian \_\_\_\_\_  
\_\_\_\_\_